Department of Health Services
Toxic Substances Control Division
Sacramento, California STEAM SLAB

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)						
Doci	anifest iment No.	2. Pa	ge 1 Informa is not	tion in th	ne shaded areas ed by Federal	
3. Generator's Name and Mailing Address	· · ·	A.State Manifest Document Number				
Douglas Aércraft Co. 190th & Normandie			49243	11		
		B.State Generator's ID				
 Generator's Phone (213 533-6677 Torrance, CA 90502 Transporter 1 Company Name US EPA ID Number 			te Terroriado	in to i	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
111						
J. C. Liquid Waste Disposal C. A. D. O. S. R. O. I. R. 3. 6. 1 7. Transporter 2 Company Name 8. US EPA ID Number			E.State Transporter's ID213 268-3137			
<u> </u>	F.Tra	nsporter's Pho te Facility's ID	ne			
9. Designated Facility Name and Site Address 10. US EPA ID Num	Triple J)		
3650 E. 26th St.			ility's Phone			
Vernon, CA CATO 8 0.0.3.	68					
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)	12.Conta	ainers Type	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.	
G E a. N Hazardous Waste Liguid NOS ORM_F NAO180						
E	001	TT	05000	G	221	
R	 					
R	<u> </u>				A CONTRACTOR OF THE PARTY OF TH	
C.						
		•				
d.						
J. Additional Descriptions for Materials Listed Above		K.Handling Codes for Was			s Listed Above	
Alkaline Soap 5%			A I			
Grease 2% 011 3%			/11			
Water 90%			U^{\dagger}			
15. Special Handling Instructions and Additional Information						
Use gloves goggles mondantes Do not						
Use gloves, goggles, respirator - Do not go near open flame or inhale fumes.						
Return to Douglas						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition						
for transport by highway according to applicable international and national gover	nmental <u>r</u>	egulati	ions.	тон Г	Date	
Printed/Typed Name Signature / Month Day Yea						
Donald C. Gerber sb / Small Ledge 10312818					<u> 23128186</u>	
17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name Signature Month Day You						
Printed/Typed Name Signature Signature Month Day S SANTOS V harry W/O 5/6444/					Month Day Year	
18. Transporter 2/Acknowledgement of Receipt of Materials						
Printed/Typed Name Signature				Ā	Month Day Year	
R	PARKON PHI PHI (CONOCHAU)				<u> </u>	
19. Discrepancy Indication Space						
F A						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered to	ov this me	nifest.	excent as note:	lin		
I term 19. Date						
Signature Mor					Month Day Year	
HUNELINE USTERBERG FOR TRIPLE J Granelin	40	6 D	caug	ľ	03/28/86	

DHS 8022 A (11/84) (EPA 8700-22)

YELLOW TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS

84 89641

Cle 700-86-JC40 2/72/1-6/74/Department of Health Services
Toxic Substances Control Division

State of California-Health and Welfare Agency Sacramento, California STEAM SLAB Please print or type. (Form designed for use on elite (12-pitch) typewriter.) Manifest Information in the shaded areas 1. Generator's US EPA ID No. 2. Page 1 UNIFORM HAZARDOUS is not required by Federal Document No. ∌ of WASTE MANIFEST A D O A 6 5 1 0 0 A State Manifest Document Number Generator's Name and Mailing Address Douglas Abrcraft Co. 8492431 190th & Normandie B.State Generator's ID Generator's Phone (213.533-6677 Torrance, CA 90502 6. C.State Transporter's ID 💪🚑 / 📒 🕂 Transporter 1 Company Name US EPA ID Number D.Transporter's Phone J. C. Liquid Waste Disposal Transporter 2 Company Name E.State Transporter's ID213 268-3137 US EPA ID Number F.Transporter's Phone G.State Facility's ID Designated Facility Name and Site Address US EPA ID Number 10. Triple J H.Facility's Phone 3650 E. 26th St. I.C.A.T.O.8 0. 0.3.3.6 8 Vernon. CA 12.Containers Unit 11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number) Total Quantity Waste No. Type Wt/Vo E Hazardous Waste Liquid NOS ORM-E NA9189 001 TT 05000 221 G b. 0 C. d. K.Handling Codes for Wastes Listed Above Additional Descriptions for Materials Listed Above Alkaline Soap Grease 3% 011 Water 90%15. Special Handling Instructions and Additional Information Gu1de #31 Use gloves, goggles, respirator - Do not go near open flame or inhale fumes. Return to Douglas 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations. Date Month Day Year Printed/Typed Name Signature Donald C. Gerber

Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

Signature

Signature

Signature

DHS 8022 A (11/84)

(EPA 8700-22)

Printed/Typed Name

Printed/Typed Name

Printed/Typed Name

19. Discrepancy Indication Space

'ANTOS VEHREA

17. Transporter 1 Acknowledgement of Receipt of Materials

18. Transporter 2/Acknowledgement of Receipt of Materials

Date Month Day Year

Date

Month Day Year

Date Month Day Year